

FEC FORM 5**REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED****To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations**

1. (a) Name of Individual, Organization or Corporation DEFENDERS OF WILDLIFE ACTION FUND		3. FEC Identification Number <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C90007907 </div>			
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1130 17TH STREET NW					
(c) City, State and ZIP Code WASHINGTON DC 20036					
2.	Corporate filers only Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
<table style="width: 100%; border: none;"> <tr> <td style="width: 5%; border: none;">Individual filers only</td> <td style="border: none; width: 65%;">Name of Employer</td> <td style="border: none; width: 30%;">Occupation</td> </tr> </table>			Individual filers only	Name of Employer	Occupation
Individual filers only	Name of Employer	Occupation			

4. TYPE OF REPORT (check appropriate boxes):

- (a) ☐ April 15 Quarterly Report ☐ 24-Hour Report ☒ 48-Hour Report
- ☐ July 15 Quarterly Report
- ☐ October Quarterly Report
- ☐ January 31 Year-End Report

(b) Is this Report an amendment? Yes ☐ No ☒

5. COVERING PERIOD: FROM

M M

 /

D D

 /

Y Y Y Y

THROUGH

M M

 /

D D

 /

Y Y Y Y

6. TOTAL CONTRIBUTIONS

.00

7. TOTAL INDEPENDENT EXPENDITURES.....

14151.00

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

Anne Saer

09/21/2006

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. 437g.

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	0	6

Mailing Address
555 Peters Ave

Amount

146.00

City
PleasantonState
CAZip Code
94566Purpose of Expenditure
Mileage reimbursementCategory/
Type 002
 Office Sought: ☒ House State: CA
☐ Senate District: 11
☐ President
Name of Federal Candidate Supported or Opposed by Expenditure:
Richard PomblCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought

.00

 Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	0	6

Mailing Address
555 Peters Ave

Amount

130.00

City
PleasantonState
CAZip Code
94566Purpose of Expenditure
Mileage ReimbursementCategory/
Type 002
 Office Sought: ☒ House State: CA
☐ Senate District: 11
☐ President
Name of Federal Candidate Supported or Opposed by Expenditure:
Richard PomboCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought

.00

 Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	0		2	0	0	6

Mailing Address
P.O. Box 9039

Amount

498.00

City
San FranciscoState
CAZip Code
90483Purpose of Expenditure
Phone BilCategory/
Type 001
 Office Sought: ☒ House State: CA
☐ Senate District: 11
☐ President
Name of Federal Candidate Supported or Opposed by Expenditure:
Richard PomboCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought

.00

 Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

774.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE **3 / 7**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee
Enterprise

Date

M M / D D / Y Y Y Y
0 9 / 2 0 / 2 0 0 6Mailing Address
2550 Monument Blvd

Amount

9563.00

City

Concord

State

CA

Zip Code

94520

Purpose of Expenditure
Van RentalsCategory/
Type

002

Office Sought:

☒

House

State: CA

House

☐

Senate

District: 11

☐

President

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Richard PomboCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For:

☐

Primary

☐

General

☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Office Max

Date

M M / D D / Y Y Y Y
0 9 / 1 3 / 2 0 0 6Mailing Address
5596 Springdale Ave

Amount

194.00

City

Polsanton

State

CA

Zip Code

94566

Purpose of Expenditure
Office SuppliesCategory/
Type

001

Office Sought:

☒

House

State: CA

House

☐

Senate

District: 11

☐

President

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Richard PomboCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For:

☐

Primary

☐

General

☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Office Depot

Date

M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 6Mailing Address
2440 Dublin Ct

Amount

1320.00

City

Dublin

State

CA

Zip Code

94568

Purpose of Expenditure
Office SuppliesCategory/
Type

006

Office Sought:

☒

House

State: CA

House

☐

Senate

District: 11

☐

President

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Richard PomboCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For:

☐

Primary

☐

General

☐ Other (specify)(a) **SUBTOTAL** of Itemized Independent Expenditures

11077.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE **4 / 7**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee
Kinko's

Date

M M / D D / Y Y Y Y
0 9 / 1 5 / 2 0 0 6Mailing Address
6070 Johnson Dr

Amount

6.00

City
PlesantonState
CAZip Code
94588Purpose of Expenditure
FaxingCategory/
Type

001

Office Sought:

☒

House

State: CA

House

☐

Senate

☐

President

District: 11

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Richard PomboCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For:

☐

Primary

☐

General

☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
WalMart

Date

M M / D D / Y Y Y Y
0 9 / 1 5 / 2 0 0 6Mailing Address
4501 Rosewood Drive

Amount

222.00

City
PleasantonState
CAZip Code
94588Purpose of Expenditure
FoodCategory/
Type

001

Office Sought:

☒

House

State: CA

House

☐

Senate

☐

President

District: 11

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Richard PomboCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For:

☐

Primary

☐

General

☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Shell

Date

M M / D D / Y Y Y Y
0 9 / 1 6 / 2 0 0 6Mailing Address
1875 Valley Ave

Amount

69.00

City
PleasantonState
CAZip Code
94566Purpose of Expenditure
GasCategory/
Type

002

Office Sought:

☒

House

State: CA

House

☐

Senate

☐

President

District: 11

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Richard PomboCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For:

☐

Primary

☐

General

☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

297.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 5 / 7

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee
The Record

Date

M M / D D / Y Y Y Y
0 9 / 1 3 / 2 0 0 6Mailing Address
530 E Market Street

Amount

27.00

City
StocktonState
CAZip Code
95020Purpose of Expenditure
SubscriptionCategory/
Type

001

Office Sought:

☒

House

State: CA

House

☐

Senate

☐

President

District: 11

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Richard PomboCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For:

☐

Primary

☐

General

☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
New York Pizza

Date

M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 6Mailing Address
690 Main Street

Amount

70.00

City
PleasantonState
CAZip Code
94566Purpose of Expenditure
FoodCategory/
Type

002

Office Sought:

☒

House

State: CA

House

☐

Senate

☐

President

District: 11

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Richard PomboCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For:

☐

Primary

☐

General

☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
AV Images

Date

M M / D D / Y Y Y Y
0 9 / 1 8 / 2 0 0 6Mailing Address
7085C Las Positas Rd

Amount

370.00

City
LiveroreState
CAZip Code
94566Purpose of Expenditure
Soundtrack mixingCategory/
Type

006

Office Sought:

☒

House

State: CA

House

☐

Senate

☐

President

District: 11

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Richard PomboCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For:

☐

Primary

☐

General

☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

467.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee
Ramada Inn

Date

M M / D D / Y Y Y Y
0 9 / 1 5 / 2 0 0 6Mailing Address
5375 Owens Court

Amount

91.00

City State Zip Code
Pleasanton CA 94566Purpose of Expenditure
Room rentalCategory/
Type 002Office Sought: ☒ House State: CA
House ☐ Senate District: 11
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Richard PomboCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought .00Disbursement For: ☐ Primary ☐ General
☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Strizzis

Date

M M / D D / Y Y Y Y
0 9 / 1 6 / 2 0 0 6Mailing Address
649 Owens Ct

Amount

970.00

City State Zip Code
Pleasanton CA 94566Purpose of Expenditure
FoodCategory/
Type 006Office Sought: ☒ House State: CA
House ☐ Senate District: 11
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Richard PomboCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought .00Disbursement For: ☐ Primary ☐ General
☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Safeway

Date

M M / D D / Y Y Y Y
0 9 / 1 6 / 2 0 0 6Mailing Address
1701 Santa Rita Rd

Amount

90.00

City State Zip Code
Pleasanton CA 94566Purpose of Expenditure
FoodCategory/
Type 006Office Sought: ☒ House State: CA
House ☐ Senate District: 11
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Richard PomboCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought .00Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

1151.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee
Bay Area Business Women

Date

M M / D D / Y Y Y Y
0 9 / 1 6 / 2 0 0 6Mailing Address
5245 College Ave

Amount

150.00

City

Oakland

State

CA

Zip Code

94618

Purpose of Expenditure

Tickets to an event

Category/
Type

002

Office Sought:

☒

House

State: CA

House

☐

Senate

☐

President

District: 11

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Richard PomboCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For:

☐

Primary

☐

General

☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Pacifica Pizza

Date

M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 6Mailing Address
3214 Pacific Ave

Amount

235.00

City

Stockton

State

CA

Zip Code

95356

Purpose of Expenditure

Food

Category/
Type

006

Office Sought:

☒

House

State: CA

House

☐

Senate

☐

President

District: 11

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Richard PomboCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For:

☐

Primary

☐

General

☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

385.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

14151.00